

The Honorable Ros Spence
Minister for Youth, Multicultural Affairs and Community Sport
Level 1/2 Treasury Place,
East Melbourne VIC 3002
By email: youth@dpc.vic.gov.au

Monday, December 21, 2020

Dear Minister Spence

Thank you for this opportunity for drummond street services to respond to the **'What matters to young people in Victoria: Victorian youth strategy discussion paper'**¹.

drummond street services (ds) provide community services across the North and Western regions of Greater Melbourne. This includes municipal youth services (the Drum) for the City of Melbourne and the City of Yarra at the Carlton, Kensington, North Melbourne, Melbourne CBD, as well as Richmond and Collingwood public housing estates. We also provide Family Mental Health Support Services (FMHSS) across North West Melbourne and Geelong.

ds programs offer a mix of services using evidence-based modalities across all age groups and provide the following in child and youth specific formats:

- counselling and support (including individual, relationship & family counselling)
- prevention and early intervention initiatives in mental health, substance use, family violence and suicide.
- case management and advocacy
- peer work leadership and mentoring
- support groups and seminars
- family violence support

At ds the overarching mission is to 'promote wellbeing for life' through focusing on:

- A 'public health approach' including risk and protective factors emphasising early intervention
- Universal, targeted universal and early interventions
- Targeting families for family-based and whole of family interventions
- Specific interventions for at risk groups for example, families during life course transitions and marginalised communities
- Centralised intake to ensure right program at right intensity for the right people

¹ Drummond Street response to: Department of Premier and Cabinet (2020). What matters to young people in Victoria: Victorian youth strategy discussion paper. Melbourne, Australia: Victorian Government.

- Client/community engagement activities to provide support pathways for hard to reach vulnerable individuals and families
- Advocacy for marginalised communities

There are six practice objectives or intended outcomes that guide the day to day work at ds and help meet the mission to promote wellbeing for life. These include:

1. Individual wellbeing
2. Connected family relationships
3. Safe family environment
4. Competent parenting
5. Material security
6. Connecting to community

drummond street is committed to working with the Victorian Government to achieve equitable and effective responses to the needs of all young people, so they have the best opportunities to succeed in life and are supported by their families and in their communities. We welcome the Government's commitment "to creating a Victoria where all young people are healthy and safe, and empowered to contribute to the issues that affect them". We recognise however the significant task this has been before - and will be after COVID.

drummond street shares the view of many others that the COVID-19 pandemic clearly illustrated systemic weaknesses that continue to contribute to the disproportionate impacts of the pandemic on particular populations, such as people of colour, people with a disability, those living in poverty, those working in casualised employment, young people and people in areas with intergenerational disadvantage. drummond street saw these impacts through our direct and sustained work with so many young people and their families who live within the 9 public housing estates who experienced 'hard lockdown'. Many who are still experiencing these impacts.

We would like to acknowledge the work of *Smart Justice for Young People* – who share our concerns about marginalised cohorts of children and youth. We support their submission to the Whole of Government Youth Strategy consultation process and have therefore reiterated some of their submission's key points alongside our considerations below.

We would welcome further discussions regarding this response and look forward to consultations on the draft strategy.

Kind Regards,



Karen Field
Chief Executive Officer

Should the Strategy refer to young people as aged 12 – 25 years old?

drummond street support the *Smart Justice for Young People's recommendation* that the Youth Strategy be extended to include children aged 0-12 on the conditions that the Strategy also:

1. *“be underpinned by a whole of state - whole of government child and young person outcomes framework that:*
 - a. *includes guiding principles*
 - b. *is organised around all domains of a child and young person's life, and*
 - c. *contains clear actions, measures and targets setting out what ‘the best place for children and young people to live’ looks like in practice*
2. *recommends the establishment of a dedicated portfolio for children and young people and their families within the new The Department of Families, Fairness and Housing; divided into early childhood, middle childhood, adolescence and young adulthood, and the creation of a Minister for Children who:*
 - a. *has primary decision-making responsibility; and*
 - b. *is accountable for reporting against the framework.”*

The appropriateness or relevance of service journey's to young people can vary. Due to diversity and inequities among the community at large, key developmental or social milestones are not always shared. Therefore, the timing of service needs as they arise among young people can vary from before, and at times after many 'youth' services are designed to be provided. drummond street agree this approach (particularly if embedded in amendments to the Children's Services, Child Safety and Well-being Act and Children Youth and Families Act 2005) would enable better coordination between service systems that support young people and their families, and centralise accountable (and transparent) oversight of a set of universal targets and measures.

We believe the SJ4YP submission offers some excellent initial practical guidance for the domains and principles of a proposed outcomes Framework for Children and Young People. We believe this proposed approach, would be useful to unify language across youth justice, child protection and youth portfolio areas along with others such as mental health. It would also:

- acknowledge issues such as youth crime/recidivism as health and wellbeing issues,
- better situate the achievement of youth outcome goals alongside addressing family risk and protective factors, and family transitions
- reduce stigma through a focus on different types of oppression and marginalisation young people face, rather than young people's characteristics in and of themselves.

Furthermore, drummond street recommend the Framework principles include principles of 'intersectionality' to guide the reading and response to outcomes attached to any disaggregated indicators within the Framework. This could be accompanied by a statement and co-designed/evidence informed sector resources. Such resources could guide co-design/co-production, service delivery, review and evaluation practices that align with theoretical approaches

to understand the interconnected nature of social categorisations (such as gender, sexual orientation, ethnicity, language, religion, class, socioeconomic status, gender identity, ability or age) which create overlapping and interdependent systems of discrimination or disadvantage for either an individual or group.

The application of intersectionality principles could be achieved partly through further developmental work across sectors on how organisations can adapt actions to meet targets and measures that respond to *intersectional* need - not just '*cohort*' need which can result in siloed and fragmented services.

The development of Framework indicators would also need to address not only barriers and adversities that lead some youth cohorts into tertiary services at a higher rate but the disproportionate harms experienced by some of these cohorts once they are in them (such as justice systems for Aboriginal and Torres Strait Islander youth, those with a disability and unaccompanied minors).

Additionally, we would like to see public health principles applied to the Framework, including an ecological approach to risk and protective factors which arise and shift during significant individual, family and broader community transitions. This can capture dynamics beyond child and adolescent developmental milestones and service, access and eligibility criteria. This should inform service design, delivery, outcomes measurement and evaluation across the spectrum of universal and targeted promotion, prevention, early intervention, response (or treatment) services, and (where relevant) 'recovery' services.

drummond street welcome the Whole of Government approach to the Strategy and believe its development is a good opportunity to improve the integration of the wider human, health, social and community services with those targeting the 'youth' bracket of 12 – 25. However, to be successful this must be done in a well-planned, coordinated way with appropriate monitoring and oversight. As a family services provider we know the power of working with children and young people in the context of their families and having youth specific approaches. Our experience has shown the power of early engagement of children, including during the "middle years" (8-12) in order for our youth and family services to be able to engage vulnerable children and families in a timely way.

Victorian young people are healthy and well, mentally and physically

Situated within the wider drummond street services and funded by the City of Melbourne (CoM), the Drum has been delivering youth services since July 2009. The Drum's activities provide capacity building opportunities and affirmative employment pathways. These activities enable young people to influence the world around them and leadership opportunities which provide the additional benefit of promoting positive role models within communities experiencing systemic discrimination and oppression.

ds Youth Services prioritise the provision of opportunities to young people (aged 8 to 25 years) who are:

- First Nations

- from diverse cultural, 'racial', ethnic and religious communities - including refugee, asylum seeker & humanitarian entrant background young people
- International students
- LGBTIQ+ (lesbian, gay, transgender, bisexual, queer, intersex queer)
- QTPOC (queer and trans young people of colour)
- public housing residents

Many of the concerns and views in the discussion paper reflect those of children, young people and their families/carers we have worked with. Youth using our programs and services tell us the importance of needing more services and activities, that are place based, low cost, safe and affirming, funded for longer periods to build relationships with providers, and flexible in terms of hours and delivery.

Lived Experience youth workforces: an opportunity for targeted COVID recovery

ds provide activities and programs developed by and for young people and employ a process of co-design that sees them create, deliver and evaluate their own programs that are developed with a public health approach. ds agree with the views of youth highlighted in the discussion paper that it is important to intervene early to support young people facing health and wellbeing issues.

We believe this is best addressed through the creation of responsive, intentional, culturally relevant and evidence-based services within a public health framework to build protective factors and respond to risks amongst young people, their families and communities across three levels - promotion and prevention; early intervention; and intensive intervention and support. This includes positive, empowering help-seeking experiences across a young person's life span. A significant driver of this is the *accessibility* of family and parenting services, other wrap around support, and primary prevention and early intervention services which address issues in ways absent of cultural stigma.

We strongly support the view that more youth voices are needed in decision-making, service design and delivery including dedicated governance and leadership positions for young people in organisations and government agencies. Culturally and linguistically diverse communities, First Nations people, people with a disability and LGBTIQ+ populations in particular, remain underrepresented in the health, human services and community sector workforces.

Specifically, there is a lack of sector employees with diverse lived experiences who experience multiple, compounding forms of discrimination and health and wellbeing inequalities. Poor workforce diversity impedes efficient or appropriate engagement with these cohorts, despite their greater support needs, further entrenching disadvantage.

Since 2017 drummond street have used a youth peer leadership model in our work on the Richmond and Collingwood Estates and with LGBTIQ+ young people of colour. Through this work and other peer leadership programs, we have learned there is tremendous opportunity for young people to act as a key enabler for providers to build service engagement capacity by including young people in the design, delivery and evaluation of services that target diverse communities.

Furthermore, ds understand issues young people have faced during COVID-19 have been compounded through reduced access to support. An evaluation of ds services during COVID² compared Risk Alerts from the 30th of March to 14th of August 2020 to the same period in 2019. This showed an increase of 1.5 times more alerts for at risk youth. The evaluation of ds services during COVID also identified children and young people have experienced increases in:

- exposure to poor mental health from their parents
- anxiety, stress and loneliness
- self-harm
- eating disorders

This was concurrent with increases across the board of other client presenting needs and risks including family violence, suicide risk, and also parenting and family issues. Overall COVID 19 impacts on client and family wellbeing fell into the areas (of increased) financial distress, family violence, risks to parents and children, mental health, loneliness and isolation and distrust of government and police³.

The second wave of COVID 19 largely impacted people living in Melbourne's growth corridors and the virus took hold in workplaces largely comprised of casual workforces, then it spread through families and whole regions. Four of the five most disadvantaged local government areas in Melbourne have had the most active COVID-19 cases, with huge numbers of cases seen across the North Western suburbs⁴. Victoria's poorest communities were also targeted by police for breaching COVID-19 restrictions, with the three poorest Local Government Areas (LGAs) accounting for 10% of all fines⁵.

We believe the focus of post pandemic recovery efforts should prioritise the needs of children and young people living in communities who experienced the greatest barriers to wellbeing, social inclusion, financial stability, safety, education and accessing services before the pandemic. Only then can Victoria achieve an equitable recovery starting block and avoid entrenching further disadvantage.

Young people could function as a key asset to COVID-19 recovery initiatives, particularly initiatives which target marginalised communities who have been most impacted by COVID-19 and the associated restrictions. A diverse youth workforce of intersectional lived experience could be bolstered through initiatives like:

- Cohort targeted Youth Peer Leadership positions
- Supported traineeships targeting youth with additional barriers to tertiary study and employment: e.g. from out of home care, youth who have been homeless, trans and gender diverse youth, youth living in public housing commissions, etc. Traineeships

2 Assessing the Impacts of COVID-19 on Client Needs and drummond streets response (Covid 19 response edition 2 – published online September 2020 (pgs. 6-18)

3 Assessing the Impacts of COVID-19 on Client Needs and drummond streets response (Covid 19 response edition 2 – published online September 2020 (pgs. 6-18)

4 Schneiders, B. and Miller, R. 8 August 2020, <https://www.theage.com.au/national/victoria/a-city-divided-covid-19-finds-a-weakness-in-melbourne-s-social-fault-lines-20200807-p55ji2.html>

5 Cooper, A. Aug 4 2020, <https://www.theage.com.au/national/victoria/more-covid-19-fines-for-victoria-s-most-disadvantaged-areas-20200804-p55iip.html>

could provide vocational and transferable qualifications alongside community specific components.

- The incorporation of the youth peer workforce in COVID-19 recovery programs, as well as prevention and early intervention programs.
- Youth specific sector navigators in areas like employment and health promotion (including mental health, women's health, infection control among others).

We believe this would build on the leadership capacity of many young people we work with, who have already stepped up to become active in issues that affect them. It would offer financial stability and position them to be role models in their communities.

The Strategy is also an opportunity to build on the Victorian Government's Youth Policy: Building Stronger Youth Engagement in Victoria⁶ to include the systemic roll out of guidance to community sector agencies on how to better engage youth through the use of Intersectional Lived Experience Workforces to ensure cultural safety for young peer leaders and lived experience staff. ds would warmly welcome the expansion of the Community Traineeship Program⁷ across more regions and the inclusion of a wider range of community organisations that youth, their families and communities are connected to. ds recommend that this be explored as one means to deliver Strategy outcomes in youth employment.

Whole family interventions to address child and youth mental health early in life.

drummond street has an established history providing the Commonwealth funded Family Mental Health Support Services (FMHSS). This is one of the few investments (nationally or at the state level) that targets vulnerable children and young people (0-18yrs) at risk of, or affected by mental illness, using a community-based, whole-of-family approach. Our evaluation of this program has identified a strong link between adult-parent mental health and that of their children⁸. It demonstrated parents who scored above the mental health distress cut-off on the general Health Questionnaire (GHQ-12) were 3.5 times more likely to have a child with mental health distress than parents with no signs of mental health distress.

ds believe this has significant implications for the child and adolescent, as well as broader adult mental health sector, and strengthens need for child and youth mental health interventions that focus on the family setting for long term and sustainable outcomes. This includes a need to increase promotion of Family-Aware and Family-Inclusive practice initiatives and Family Therapy Interventions. We believe this approach would increase capacity to prevent and intervene early in circumstances where young people are at high risk of poor mental health outcomes.

Similarly, the consultations for the Youth Strategy discussion paper highlighted the importance of prevention approaches and greater mental health promotion. We believe child and adolescent mental health prevention, early intervention and early treatment must:

6 Victorian Government's Youth Policy: Building Stronger Youth Engagement in Victoria (2016) DHHS

7 <https://jobs.vic.gov.au/about-jobs-victoria/our-programs/youth-employment-programs>

8 Gibson, M., Johnson, S. and Field, K. (2019). The Relationship Between Parent and Child Mental Health: Taking a Family Systems Perspective in Support Services. FRSA, 4(1), pp.4-15.

- use evidence informed and family-based interventions
- be delivered in non-stigmatising family service settings
- apply whole of family assessment and interventions which reduce family level risk factors and augment protective factors to support and target broader issues such as family safety, family functioning, relationships and parenting.

drummond street services believe it is vital to integrate the following into the Youth Strategy (and related implementation plans) to enable family inclusive/family contextual wrap around, integrated system supports that capture vulnerable life transitions in children and young people:

- Reorientation of child and youth mental policy directives to broaden efforts inclusive of a life course prevention approach.
- Acknowledgment of social determinants and a focus on reducing inequalities in state mental health and human services policy
- Ensuring prevention, early intervention and responses to poorer mental health are prioritised.
- Exploration of how youth programs, State and local Government services and family and early intervention services (including those funded by the Commonwealth) can be better integrated (e.g. more resourcing and funding youth networks).
- Exploration of potential youth services workforce innovations to ensure young people are seen in the context of their families and families of choice (such as the development of senior therapeutic workers to oversee and guide the work of separate youth and family services workers in integrated family practice models)
- Assess the increased need for generalist youth workers who can coordinate access to multiple services so these positions can be rolled out systematically, where they are most needed.

A comment on the statement:

“We are committed to creating a Victoria where all young people are healthy and safe, and empowered to contribute to the issues that affect them. We want every single young person to have equitable access to opportunities and support to participate fully in the social, economic and civic life of our state.”

drummond street would like to see some acknowledgment of structural disadvantage in the above statement to align with the attention given to disparities between cohorts of youth in the discussion paper. It is our view that acknowledgement of systemic barriers and discrimination experienced by particular communities (such as First Nations youth, youth with disabilities, young people of colour and youth of diverse sexual orientation and gender identities) would be useful in shifting the frame of blame often directed to young people and their families to one of imperatives to act on dismantling these barriers.